DISTRICT DEPARTMENT OF THE ENVIRONMENT

NOTICE OF PROPOSED RULEMAKING

The Director of the District Department of the Environment ("DDOE"), pursuant to the authority set forth in the Green Building Act of 2006, effective March 8, 2007 (D.C. Law 16-234; D.C. Official Code § 6-1451.11) ("GBA"), section 107(4) of the District Department of the Environment Establishment Act of 2005, effective February 15, 2006 (D.C. Law 16-51; D.C. Official Code § 8-151.07(4)), and Mayor's Order 2007-206, dated September 21, 2007, hereby gives notice of the intent to amend Title 20 of the District of Columbia Municipal Regulations ("DCMR") to establish rules to assist in the implementation of the Green Building Act in not less than thirty (30) days from the date of publication of this notice in the *D.C. Register*.

Prior to the issuance of a notice of final rulemaking, this rulemaking will be submitted to the Council of the District of Columbia for a review period of up to forty-five (45) days, as required by section 12 of the GBA.

The proposed rules include two provisions necessary to satisfy the requirements of the GBA: (1) to adopt the Leadership in Energy and Environmental Design ("LEED") Green Building Rating System for Schools as the standard for new and substantially renovated public schools; and (2) to establish the basis and process for granting exemptions from the GBA's requirements. The exemption rules were the result of consultation with the Green Building Advisory Council, created by the GBA. DDOE also notes that the specific language in section 3(b) of the GBA only requires school buildings to meet the LEED certification level, unlike other District government buildings which must meet the LEED silver certification level.

The rules also establish an internal DDOE expedited permit review provision for all projects that DDOE determines offer exemplary environmental benefits. The Department of Consumer and Regulatory Affairs is in the process of establishing a complimentary expedited review process.

This proposed rulemaking only covers authority granted to DDOE under Mayor's Order 2007-206. Other agencies delegated authority under the GBA will be promulgating rules separately.

TITLE 20 DCMR (ENVIRONMENT) is amended as follows:

A new chapter 35 is added to read as follows:

CHAPTER 35 GREEN BUILDING REQUIREMENTS

3501 STANDARDS FOR NEW SCHOOL BUILDINGS

3502-3510 3511 3512 3513-3598 3599	[RESERVED] EXEMPTIONS FROM GREEN BUILDING ACT REQUIREMENTS EXPEDITED PERMIT REVIEW [RESERVED] DEFINITIONS
3501	STANDARDS FOR NEW SCHOOL BUILDINGS
3501.1	Any new public school constructed in the District shall meet the Leadership in Energy and Environmental Design (LEED) for Schools standard at the certification level or higher.
3501.2	Any public school shall meet the LEED for Schools standard at the certification level or higher after any substantial improvement.
3502-3510	[RESERVED]
3511	EXEMPTIONS FROM GREEN BUILDING ACT REQUIREMENTS
3511.1	The Director of the District Department of the Environment (DDOE) may, on a case by case basis, grant an exemption from any requirement of the Act upon a showing of good cause by the applicant.
3511.2	Good cause for granting an exemption under subsection 3511.1 means one of the following:
	(a) Substantial evidence of a practical infeasibility or hardship in meeting a required green building standard;
	(b) A determination that the public interest would not be served if the applicant had to comply with the requirement;
	(c) LEED certification is not available for the building type that is subject to the Act's requirements; or
	(d) The building subject to the Act's requirements is unoccupied.
3511.3	An applicant may also seek an exemption from the Act if the applicant is building a temporary building.
3511.4	The burden shall be on the applicant to show circumstances to establish hardship or infeasibility under this section. Each applicant requesting an exemption under subsections 3511.2 or 3511.3 shall submit to the Director:
	(a) A description of public benefits proposed that are not otherwise required by any applicable law or regulation; and

- (b) Any other information required by the Director.
- An applicant seeking an exemption because the building that is the subject of the application is planned as a temporary building, shall submit the following information to the Director, in addition to the information submitted pursuant to subsection 3511.4:
 - (a) Documentation that the building will in fact be temporary;
 - (b) An explanation of the need for the building; and
 - (c) Any other information requested by the Director.
- Any applicant granted an exemption for a temporary building shall recycle as many building components as feasible when it is deconstructed.
- An application for exemption shall be submitted, through DDOE, to the Green Building Advisory Council (GBAC) for comments and recommendation.
- 3511.8 GBAC's comments and recommendations shall be provided to DDOE within 30 days of the date of submission.

3512 EXPEDITED PERMIT REVIEW

- The incentives in Section 7(a) of the Act shall apply to any project that will meet LEED certification, including LEED for Homes, at the Gold level or higher.
- Review of an application for any DDOE approval that will meet LEED certification at the Gold level or higher, or can demonstrate other exemplary environmental benefits of the project, shall be completed within the following timeframes:
 - (a) Before October 1, 2008, not more than fifteen (15) days after submission; and
 - (b) On and after October 1, 2008, not more than seven (7) days after submission.
- 3512.3 The time period in subsection 3512.2 shall begin when all documents necessary for review are received, as determined by the Director.

3599 **DEFINITIONS**

Act – the Green Building Act of 2006.

DDOE – the District Department of the Environment.

LEED – the series of Leadership in Energy and Environmental Design green building rating systems designed by the United States Green Building Council (USGBC).

Public School – schools owned, operated, or maintained by the District of Columbia Public Schools (DCPS), or a public school chartered by DCPS.

Substantial Improvement – any repair, alteration, addition, or improvement of a building or structure, the cost of which equals or exceeds fifty percent (50%) of the market value of the structure before the improvement or repair is started. If the structure has sustained substantial damage, any repairs are considered substantial improvement regardless of the actual repair work performed. The term does not, however, include either:

- (a) Any project for improvement of a building required to correct existing health, sanitary or safety code violations identified by the code official and that are the minimum necessary to assure safe living conditions; or
- (b) Any alteration of a historic structure provided that the alteration will not preclude the structure's continued designation as a historic structure.

All persons desiring to comment on the subject matter of this proposed rulemaking should file comments, in writing, to Brendan Shane, Office of Policy and Sustainability, District Department of the Environment, by mail: 51 N Street, N.E., 6th Floor, Washington, D.C. 20002, or by email: Brendan.Shane@dc.gov. Comments must be received no later than thirty (30) days after publication of this notice in the *D.C. Register*. Copies of these proposed rules may be obtained by writing to the above address and online at http://ddoe.dc.gov/ddoe.

DEPARTMENT OF HEALTH

NOTICE OF PROPOSED RULEMAKING

The Director of the Department of Health, pursuant to the authority set forth in §104(a)(1) of the Department of Consumer and Regulatory Affairs Civil Infractions Act of 1985, effective October 5, 1985 (D.C. Law 6-42; D.C. Official Code § 2-1801.04(a)(1)(2001)), § 908(d) of the Rodent Control Act of 2000, effective October 19, 2000 (D.C. Law 13-172; D.C. Official Code § 8-2103.05(d) (2001)), and Mayor's Order 2001-21, dated September 30, 2005, hereby gives notice of his intent to adopt the following amendments to Chapter 36 of Title 16 of the *District of Columbia Municipal Regulations* in not less than thirty (30) days.

Pursuant to § 104(a)(1) of the Department of Consumer and Regulatory Affairs Civil Infractions Act of 1985, effective October 5, 1985 (D.C. Law 6-42; D.C. Official Code § 2-1801.04(a)(1)), the proposed rules will be submitted to the Council of the District of Columbia for review and approval. This rule will become effective upon Council approval, or sixty (60) days after submission, if the Council has not disapproved the proposed rulemaking, and publication of the final rules in the *D.C. Register*.

This rule will amend section 3631 of Title 16 of the *District of Columbia Municipal Regulations* by amending the schedule of fines for violations of 21 DCMR Chapter 7, 22 DCMR Chapter 1, 25 DCMR Chapter 27, and D.C. Official Code § 8-2103.05 (2001) related to rodent control.

Section 3631 of Title 16 (Consumers, Commercial Practices & Civil Infractions) (July 1998) of the District of Columbia Municipal Regulations is amended to read as follows:

3631 RODENT CONTROL INFRACTIONS

- 3631.1 RESERVED
- 3631.2 RESERVED
- 3631.3 Violation of any of the following provisions shall be a Class 3 infraction:
 - (a) 21 DCMR § 700.3 (failure to properly containerize solid wastes);
 - (b) 21 DCMR § 705.3 (permitting spillage of waste from a container or collection vehicle at a point of collection);
 - (c) 21 DCMR § 707.3 (failure to provide a sufficient number of food waste containers);

- (d) 21 DCMR § 707.9 (failure to properly store grease held for recycling or disposal);
- (e) 21 DCMR § 707.11 (failure to use a properly constructed and properly maintained commercial waste container);
- (f) 22 DCMR § 107.1(a) (failure to comply with an order to provide vent stoppage of any rat-infested building or other structure or part thereof);
- (g) 22 DCMR § 107.1(b) (failure to comply with an order to remove trash or refuse from the premises which may provide rat harborage);
- (h) 22 DCMR § 107.1(c) (failure to comply with an order to protect food and garbage from rats);
- (i) 22 DCMR § 107.1(d) (failure to comply with an order to exterminate rats on the premises of buildings or other structures);
- (j) 22 DCMR § 107.4 (refusal to permit or interfering with inspections to determine the prevalence of rats);
- (k) 25 DCMR § 2705.1 (failure to have tight-fitting lid, door, or cover on a food waste receptacle);
- (1) 25 DCMR § 2705.2 (failure to install waste handling unit for refuse and recyclables in a manner that minimizes insect and rodent harborage and allows effective cleaning around and under the unit);
- (m) 25 DCMR § 2706.1 (failure to maintain sufficient storage capacity for refuse, recyclables, and returnables);
- (n) 25 DCMR § 2706.2 (failure to provide a waste receptacle in each area where refuse is generated or recyclables or returnables are placed);
- (o) 25 DCMR § 2706.3 (failure to place a waste receptacle in a lavatory where disposable towels are used);
- (p) 25 DCMR § 2710.1 (failure to store refuse, recyclables, and returnables in receptacles so they are inaccessible to insects and rodents);
- (q) 25 DCMR § 2712.1 (storage of unprotected plastic bags, paper bags, or baled units containing food residue outside);

- (r) 25 DCMR § 2712.2 (storage of packaging material in a way that creates a rodent harborage problem);
- (s) 25 DCMR § 2713.1 (failure to keep waste handling units covered when used inside and not in continuous use);
- (t) 25 DCMR § 2713.2 (failure to keep waste handling units for refuse, recyclables, and returnables covered with tight-fitting lids or doors when kept outside);
- (u) 25 DCMR § 2714.1 (failure to have a drain plug in place in a receptacle for refuse, recyclable, and returnables);
- (v) 25 DCMR § 2715.1 (failure to keep storage area for refuse, recyclables, and returnables clean and free of unnecessary equipment);
- (w) 25 DCMR § 2716.1 (failure to thoroughly clean receptacles and waste handling units for refuse, recyclables, and returnables);
- (x) 25 DCMR § 2716.2 (failure to clean receptacles and waste handling units for refuse, recyclables, and returnables frequently enough to prevent attracting insects and rodents);
- (y) 25 DCMR § 2717.1 (failure to remove refuse, recyclables, and returnables from the premises frequently enough to minimize objectionable odors and other conditions that attract or harbor insects and rodents);
- (z) 25 DCMR § 2717.2 (failure to maintain copies of waste removal contractor records);
- (aa) 25 DCMR § 2717.3 (failure to comply with a solid waste collection requirement of 21 DCMR Chapter 7);
- (bb) Section 908(c) of the Rodent Control Act of 2000 (D.C. Official Code § 8-2103.05 (c)) (failure to use a licensed and certified pest controller to abate existing rodent populations due to the accumulation of debris on public or private property);
- (cc) Section 908(b) of the Rodent Control Act of 2000 (D.C. Official Code § 8-2103.05(b)) (failure of an owner to comply with an order to take appropriate abatement measures if signs of past rodent harborage are found upon transfer or change of occupancy of real property); and

(dd) Section 908(c) of the Rodent Control Act of 2000, effective October 19, 2000 (D.C. Law 13-172; D.C. Official Code § 8-2103.05(c)) (failure to comply with an order to remove debris from public or private property).

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- 3631.4 Violation of any of the following provisions shall be a Class 4 infraction:
 - (a) 21 DCMR § 708.10(e) (using plastic bags to store and dispose of solid waste other than yard waste; and
 - (b) Section 908(c) of the Rodent Control Act of 2000 (D.C Official Code § 8-2103.05 (c)) (failure to comply with an order to keep grass or weeds cut to a height of less than eight (8) inches).
- Violation of 21 DCMR § 707.12 (failure to store pet food or bird seed in a rodent-proof container or remove uneaten food or feed remaining on the ground after birds and pets have been fed) shall be a Class 5 infraction.

Persons desiring to comment on these proposed rules should submit comments in writing to the Department of Health, Office of the General Counsel, 825 North Capitol Street, N.E., 4th Floor, Washington, D.C. 20002, no later than thirty (30) days after the date of publication of this notice in the <u>D.C. Register</u>. Copies of these proposed rules may be obtained between 8:30 A.M. and 5:00 P.M. at the address stated above.

DEPARTMENT OF HEALTH

NOTICE OF PROPOSED RULEMAKING

The Interim Director of the Department of Health, pursuant to the authority set forth in § 4 of the Immunization of School Students Act of 1979, effective September 28, 1979 (D.C. Law 3-20; D.C. Official Code § 38-503), Mayor's Order 2006-117, dated September 5, 2006, § 1 of An Act to authorize the Commissioners of the District of Columbia to make regulations to prevent and control the spread of communicable and preventable diseases, approved August 11, 1939 (53 Stat. 1408, ch. 601, § 1; D.C. Official Code § 7-131), and § 2 of Mayor's Order 98-141, dated August 20, 1998, hereby gives notice of his intent to adopt the following amendments to Chapter 1 of Title 22 of the District of Columbia Municipal Regulations in not less than thirty (30) days from the date of publication of this notice in the *D.C. Register*. A Notice of Proposed Rulemaking was published December 28, 2007, at 54 DCR 12643. In response to the notice the Director received two comments. In response to the comments, and for other reasons, the Director has chosen to make changes to the rule as previously published and is republishing the Notice of Proposed Rulemaking.

These rules will require health care providers to report the administration of all vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) for vaccine-preventable diseases, revise the required immunizations for school students by including vaccines that have been approved by the federal Food and Drug Administration since February 1, 1991, and update the procedures for administering vaccines already listed.

Chapter 1 of Title 22 DCMR (Public Health & Medicine) (August 1986) is amended as follows:

- I. A new section 129 is added to read as follows:
- 129 IMMUNIZATION: REPORTS AND GENERAL PROVISIONS
- Each health care provider shall report to the Department each immunization recommended in the United States by the ACIP that he or she administers, as well as the past immunizations administered by any health care provider, to a person twenty six (26) years of age or younger, within seven (7) days of administering the vaccination. Each health care provider shall report the information required by this subsection in the manner and form the Department prescribes. Each report shall include the following information:
 - (a) Demographic information for each person vaccinated, including:
 - (1) The person's full name, including any suffix, nickname, or alternate surname that may apply;
 - (2) The person's date of birth and, for newborn's, the name of the hospital that delivered the newborn;

- (3) The person's social security number, if applicable;
- (4) The person's Medicaid number, if applicable;
- (5) The name of the person's parent or guardian, if the person is younger than eighteen (18) years of age;
- (6) The person's address;
- (7) The person's phone number;
- (8) The person's race or ethnicity;
- (9) The person's insurance status and the name of the insurer, if applicable; and
- (10) The person's gender.
- (b) Immunization data, including:
 - (1) The type of each vaccine administered;
 - (2) The date the vaccine was administered;
 - (3) The manufacturer and lot number of the vaccine;
 - (4) Verification that the vaccine information statement was given to the recipient of the vaccine and the publication date of the vaccine information statement for the vaccine given;
- (c) Provider information, including:
 - (1) The provider's name;
 - (2) The provider's address;
 - (3) The provider's phone number; and
 - (4) The name of the person who administered the vaccine; and
- (d) Medical and clinical information, including:
 - (1) Any adverse reaction to active immunization;
 - (2) Information about medical contraindications, including:

- (A) Whether contraindication is temporary or permanent; and
- (B) The antigen for which there was a contraindication;
- (3) Information about exemption from vaccination, including:
 - (A) Reason for the exemption;
 - (B) The antigen for which the exemption applies;
 - (C) The date the exemption expires, if applicable;
- (4) Copy of laboratory results as evidence of immunity; and
- (5) Varicella disease status including certification of infection with varicella that includes either:
 - (a) A copy of laboratory results indicating varicella disease or immunity to varicella; or
 - (b) A health care provider's diagnosis or verified history of varicella or herpes zoster disease that includes the month and year of the disease.
- Each of the following entities shall report the immunization history of an individual to the Department in the manner and form the Department prescribes:
 - (a) Each public, private, parochial, or charter school shall submit certification of immunization for each noncompliant student as determined by the Department within ten (10) business days of notification from the Department; and
 - (b) Each child development facility shall submit certification of immunization for each noncompliant child as determined by the Department within ten (10) business days of notification from the Department.
- A post-secondary institution is not required to report active immunization, but the Department encourages reporting of immunization for students currently enrolled in the school.
- Information disclosed to the Department pursuant to §§ 129.1 and 129.3 shall be kept confidential and shall not be used or disclosed to a third party, except as provided in this subsection. The Department may use

and disclose information received pursuant to this section to safeguard the physical health of others as follows:

- (a) The Department may use patient-specific immunization information to produce aggregate immunization coverage reports;
- (b) The Department may use immunization information to produce official immunization records for individuals;
- (c) The Department may use or disclose individually identifiable immunization information without the consent of the person to whom the information pertains to notify the following individuals or entities of due dates for immunizations or missed or overdue immunizations according to the schedule recommended by the Advisory Committee on Immunization Practices (ACIP) to the following:
 - (1) The person;
 - (2) The person's parent or guardian;
 - (3) The person's health care provider or insurer;
 - (4) A child development facility in which the person is enrolled;
 - (5) A school in which the person is enrolled; and
- (d) Except as provided in subsections (a) through (c), the Department may disclose a person's individually identifiable information to a third party only with the written consent of the person, or the person's parent or guardian if the person is under eighteen (18) years of age or an unemancipated adult.
- Notwithstanding the requirements of §§ 130 through 154 specifying minimum and maximum intervals between administration of vaccinations, a vaccine administered four (4) days or less than the minimum interval or age shall be a valid dose. This subsection shall not apply to the minimum intervals between live antigen vaccinations, including:
 - (a) Measles, mumps, rubella (MMR); and
 - (b) Varicella.
- A vaccine administered five (5) or more days before the minimum interval or age shall not be counted as a valid dose and shall be repeated as age-and interval-appropriate. The repeat dose shall be spaced after the invalid

dose by the recommended minimum interval as provided in §§ 130 through 154.

129.7 A combination vaccine may be administered as an alternate for any dose of the vaccine series for which it is licensed.

II. Sections 130 through 137 are amended to read as follows:

- 130 REQUIRED IMMUNIZATIONS FOR STUDENTS UNDER SEVEN (7) YEARS OF AGE
- Before a child under seven (7) years of age enters school or a child development center, the parent or guardian of the child shall have the child immunized according to the requirements in sections 131 through 137. The doses of immunization shall follow these regulations or the recommendations of the ACIP published after the date of these regulations. The Director strongly recommends that a parent or guardian of a child who does not attend a school or child development center immunize the child in the same manner required for children who do attend a school or child development center.
- DIPHTHERIA, TETANUS, WHOLE-CELL OR ACELLULAR PERTUSSIS
- The first dose of diphtheria, tetanus, whole-cell pertussis (DTP) or diphtheria, tetanus, acellular pertussis (DTaP) shall be administered not earlier than six (6) weeks of age and not later than two (2) months of age.
- The second dose of DTP or DTaP shall be administered not earlier than four (4) weeks after the first dose and not later than two (2) months after the first dose.
- The third dose of DTP or DTaP shall be administered not earlier than four (4) weeks after the second dose and not later than two (2) months after the second dose.
- 131.4 A fourth dose of DTP or DTaP shall be administered:
 - (a) Not earlier than six (6) months after the third dose;
 - (b) Not earlier than twelve (12) months of age; and
 - (c) By nineteen (19) months of age.
- 131.5 A booster, or fifth dose of DTP or DTaP, shall be administered:
 - (a) Not earlier than six (6) months after the previous dose;

- (b) Not earlier than four (4) years of age; and
- (c) Not later than the fifth birthday.
- A fifth dose of DTP or DTaP shall not be required for a student who received the fourth dose on or after four (4) years of age.
- Any licensed DTaP or DTP vaccine or combination vaccine may be administered as an alternate for any dose of the series for which it is licensed.
- For a student under seven (7) years of age, pediatric diphtheria tetanus (DT) vaccine may be administered instead of DTaP or DTP only when the provider follows current acceptable guidelines for valid contraindications for pertussis vaccine, as recommended by the ACIP. If DT is administered instead of DTaP or DTP, a physician or Advance Practice Nurse shall also provide a signed medical exemption request for pertussis to the student's parent or guardian for the certification required by D.C. Official Code § 38-502.
- 131.9 If a student receives pediatric DT instead of DTaP or DTP, the number and timing of the doses needed to complete the DT series shall be as follows:
 - (a) If the first dose of DT is administered at twelve (12) months of age or younger, four (4) doses shall be administered, with the remaining three (3) doses being given according to the schedule stated in §§ 131.2 to 131.4;
 - (b) If the first dose of DT is administered after twelve (12) months of age, three (3) doses shall be administered. The second dose shall be administered no earlier than four (4) weeks after the first dose but not later than two (2) months after the first dose. The third dose shall be administered six (6) months after the second dose; and
 - (c) If the third or fourth dose of DT was administered before four (4) years of age, the student shall have a booster dose at age four (4) and not later than five (5) years of age.
- ORAL OR INACTIVATED POLIO (OPV or IPV)
- Each student under seven (7) years of age who receives his or her primary immunization shall have either oral poliovirus vaccine (OPV) or inactivated polio vaccine (IPV) administered according to §§ 132.2 to 132.6.

132.2	The first dose shall be administered no earlier than six (6) weeks of age and not later than two (2) months of age.
132.3	The second dose shall be administered no earlier than four (4) weeks after the first dose and not later than two (2) months after the first dose.
132.4	The third dose shall be administered two (2) months after the second dose and by nineteen (19) months of age, but no earlier than four (4) weeks after the second dose.
132.5	A supplementary fourth dose shall be administered at four (4) years of age and by the fifth birthday, but no earlier than four (4) weeks after the third dose. If the third dose of a primary series of all OPV or all IPV was given on or after four (4) years of age, a fourth dose shall not be required. If the fourth dose was given before four (4) years of age and not earlier than four (4) weeks after the third dose, no additional dose shall be required.
132.6	If a combination of OPV and IPV doses are administered as part of a series, a total of four (4) doses shall be administered, regardless of the student's present age or the student's age at administration of the primary series. The fourth dose shall be administered no earlier than four (4) weeks after the third dose.
133	MEASLES, MUMPS, RUBELLA (MMR)
133.1	The first dose of measles, mumps, and rubella (MMR) vaccine shall be administered no earlier than twelve (12) months of age and not later than sixteen (16) months of age.
133.2	The second dose of MMR shall be administered at four (4) years of age and by the fifth birthday, but no earlier than twenty-eight (28) days after the first dose. The Department recommends administration of the second dose at the next pediatric visit after the first dose, but no earlier than twenty-eight (28) days after the first dose.
133.3	If single antigen measles, mumps, and rubella vaccines are used, two (2) doses of each vaccine shall be administered, with a minimum interval of twenty-eight (28) days between dose (one) 1 and dose (two) 2. A dose of MMR, Varicella, one of the single-antigen measles, mumps, rubella, or any other live parenteral vaccines shall not be administered less than twenty-eight (28) days apart, unless administered on the same day.
134	HAEMOPHILUS INFLUENZA TYPE B (Hib)
134.1	The first dose of Haemophilus influenza type B (Hib) shall be administered no earlier than six (6) weeks of age and not later than two (2)

months of age.

134.2	The second dose of Hib shall be administered no earlier than one (1)
	month after the first dose and not later than two (2) months after the first
	dose.

- The third dose of Hib shall be administered no earlier than one (1) month after the second dose and not later than two (2) months after the second dose. The third dose shall not be required, if the PRP-OMP (PedvaxHIB) vaccine was administered for the first and second doses.
- If different brands of licensed Hib conjugate vaccines are administered for the first two (2) doses, a total of three (3) doses shall be required to complete the primary series. Any combination of licensed Hib conjugate vaccines for use in infants may be administered to complete the primary series.
- 134.5 A booster dose of Hib shall be administered no earlier than two (2) months after the previous dose and at twelve (12) months of age and by sixteen (16) months of age.
- An unvaccinated infant between the ages of seven (7) and eleven (11) months shall receive two (2) doses of Hib to complete the primary series, administered no earlier than one (1) month apart but not later than two (2) months apart. A booster dose shall be administered no earlier than two (2) months after the previous dose at twelve (12) months of age and by sixteen (16) months of age.
- An undervaccinated infant between the ages of seven (7) and eleven (11) months shall complete the series according to the requirements of §§ 134.2, 134.3, and 134.5.
- An unvaccinated or undervaccinated infant between twelve (12) and fourteen (14) months of age shall receive one (1) dose of Hib, followed by a booster dose. The booster dose shall be administered two (2) months after the previous dose.
- An unvaccinated student between fifteen (15) months and five (5) years of age shall receive a single dose of Hib. A booster dose shall not be required.
- The Hib vaccine shall not be required for a student five (5) years of age or older regardless of Hib vaccination status.
- 135 HEPATITIS B
- 135.1 The first dose of hepatitis B is recommended at birth, but shall be

administered not later than at one (1) month of age.

- The second dose shall be administered no earlier than one (1) month after the first dose and by three (3) months of age.
- The third dose shall be administered no earlier than two (2) months after the second dose, at least four (4) months after the first dose, not earlier than 24 weeks of age, and by nineteen (19) months of age.
- 136 VARICELLA (Chickenpox)
- The first dose of varicella is recommended at twelve (12) months of age, but shall be administered not earlier than twelve (12) months of age and by sixteen (16) months of age. A dose of MMR, varicella, one of the single-antigen measles, mumps, rubella, or any other live parenteral vaccine shall not be administered less than twenty-eight (28) days apart, unless administered on the same day.
- Beginning with the 2008/2009 school year, a second dose of varicella shall be administered at four (4) years of age and by the fifth birthday. An interval of three (3) months is recommended between each dose of varicella-containing vaccine given between twelve (12) months and twelve (12) years of age. If the second dose was given twenty-eight (28) days or more after the first dose, the second dose does not need to be repeated. A dose of MMR, varicella, one of the single-antigen measles, mumps, rubella, or any other live parenteral vaccine shall not be administered less than twenty-eight (28) days apart, unless administered on the same day.
- The varicella vaccination shall not be required for a student who has written certification of infection with varicella that includes either:
 - (a) Copy of laboratory results as evidence of varicella disease or immunity to varicella; or
 - (b) A health care provider's diagnosis or verified history of varicella or herpes zoster disease that includes the month and year of the disease.
- 137 PNEUMOCOCCAL CONJUGATE 7-VALENT VACCINE (PCV7)
- Beginning with the 2008/2009 school year, pneumococcal conjugate 7-valent vaccine (PCV7) shall be required for all students under the age of five (5) years.
- The first dose of PCV7 shall be administered no earlier than six (6) weeks of age and not later than two (2) months of age.

apart.

137.3	The second dose of PCV7 shall be administered no earlier than one (1) month after the first dose and not later than two (2) months after the first dose.
137.4	The third dose of PCV7 shall be administered no earlier than one (1) month after the second dose and not later than two (2) months after the second dose.
137.5	A booster dose of PCV7 shall be administered not earlier than two (2) months after the previous dose, not earlier than twelve (12) months of age, and by sixteen (16) months of age.
137.6	An unvaccinated student between seven (7) and eleven (11) months of age shall receive two (2) doses of PCV7 to complete the primary series, administered no earlier than one (1) month apart but not later than two (2) months apart. A booster dose shall be administered no earlier than two (2) months after the previous dose at twelve (12) months of age and by sixteen (16) months of age.
137.7	An undervaccinated student between seven (7) and eleven (11) months of age who has received one (1) or two (2) doses of PVC7 before age seven (7) months, shall receive one (1) dose administered no earlier than one (1) month after the previous dose but not later than two (2) months after the previous dose. A booster dose shall be administered no earlier than two (2) months after the previous dose at twelve (12) months of age and sixteen (16) months of age.
137.8	An unvaccinated student between twelve (12) and twenty-three (23) months of age shall receive two (2) doses of PCV7 administered two (2) months apart.
137.9	An undervaccinated student between twelve (12) and twenty-three (23) months of age who has received one (1) dose of PCV7 before twelve (12) months of age shall receive two (2) doses administered two (2) months

- An undervaccinated student between twelve (12) and twenty-three (23) months of age who has received one (1) dose of PCV7 on or after age twelve (12) months shall receive one (1) dose of PCV7 administered two (2) months after the previous dose.
- An undervaccinated student between twelve (12) and twenty-three (23) months of age, who has received two (2) or three (3) doses of PCV7 before age twelve (12) months, shall receive one (1) dose two (2) months after the previous dose.
- 137.12 An unvaccinated student twenty-four (24) months of age or older but not

	yet five (5) years of age shall receive a single dose of PCV7. A booster dose shall not be required.
137.13	An undervaccinated student twenty-four (24) months of age or older but not yet five (5) years of age who has an incomplete schedule shall receive one (1) dose of PCV7 two (2) months after the previous dose.
137.14	The PCV7 vaccine shall not be required for a student five (5) years of age or older regardless of PCV7 vaccination status.
III.	A new section 138 is added to read as follows:
138	HEPATITIS A
138.1	Beginning with the 2009/2010 school year, two (2) doses of hepatitis A vaccine shall be administered to each student born on or after January 1, 2005.
138.2	The first dose of hepatitis A shall be administered no earlier than twelve (12) months of age and by twenty-four (24) months of age.
138.3	The second dose of hepatitis A shall be administered not earlier than six (6) months and not later than twelve (12) months after the first dose and by thirty-five (35) months of age.
138.4	An unvaccinated or undervaccinated student more than twenty-four (24) months of age and less than age seven (7) shall receive two (2) doses of hepatitis A vaccine administered not less than six (6) months apart and not later than twelve (12) months after the first dose.
IV.	Sections 140 through 145 are amended to read as follows:
140	REQUIRED IMMUNIZATIONS FOR STUDENTS BETWEEN SEVEN (7) YEARS OF AGE AND SEVENTEEN (17) YEARS OF AGE
140.1	A student seven (7) years of age or older and not yet eighteen (18) years of age shall receive immunizations before entry into a school, child care facility, or post high school program according to the requirements of §§ 141 through 145. Doses of immunizations shall be spaced according to these rules or the recommendations of the federal Advisory Committee on

A student who has not received primary immunization for tetanus, diphtheria and pertussis by seven (7) years of age shall receive tetanus,

Immunization Practices (ACIP) published after the date of these rules.

diphtheria (Td)-containing vaccine as follows:

- (a) Until the beginning of the 2008/2009 school year, each student shall receive a total of three (3) doses of Td-containing vaccine. The first and second doses shall be administered not less than four (4) weeks and not more than eight (8) weeks apart. The third dose shall be administered not less than six (6) months and not more than seven (7) months after the second dose. It is recommended that one dose be Tdap vaccine for students eleven (11) years of age or older.
- (b) After the 2008/2009 school year, the student shall receive a total of three (3) doses of Td-containing vaccine. The first and second doses shall be administered not less than four (4) weeks and not more than eight (8) weeks apart. The third dose shall be administered not less than six (6) months and not more than seven (7) months after the second dose. Tdap shall be administered in place of one (1) dose Td-containing vaccine, preferably the first dose, for students eleven (11) years of age or older.
- DTP, DT, or DTaP doses administered before age seven (7) may satisfy § 141.1, unless given before the appropriate age or at less than the required minimum interval between doses. If the last dose of DT-containing vaccine was given before four (4) years of age, one additional dose of Td or Tdap shall be administered.
- Beginning with the 2008/2009 school year, if the last dose of the primary DT-containing immunization series or booster was administered before age seven (7), a Tdap booster dose shall be administered no sooner than five (5) years after the previous dose at eleven (11) years of age, but no later than the twelfth (12) birthday. If the last dose of the primary DT-containing immunization series or booster was administered on or after age seven (7), a Tdap booster dose shall be administered no earlier than five (5) years and not later than six (6) years after the last DT-containing immunization.
- 141.4 A Td or Tdap-containing booster shall be administered at ten (10) years after the primary series or the last booster and by eleven (11) years of age. Tdap shall be used for one (1) dose beginning with the 2008/2009 school year.
- ORAL OR INACTIVATED POLIO (OPV or IPV)
- A student who has not received a primary immunization with an all IPV or all OPV series shall receive a total of three (3) vaccine doses. Each dose shall be administered not less than four (4) weeks apart.

- OPV or IPV doses administered before the age of seven (7) may satisfy § 142.1, unless given before the appropriate age or at less than the required minimum interval between doses.
- If a combination of OPV and IPV doses are administered as part of a series, a total of four (4) doses are required, regardless of current age or age at administration of primary series. The fourth dose shall be administered no earlier than four (4) weeks and not later than eight (8) weeks after the third dose.
- For each student eighteen (18) years of age or older, the polio immunization vaccine is recommended but not required.
- 143 MEASLES, MUMPS, RUBELLA (MMR)
- For a student who has not received a primary immunization, two (2) doses shall be administered. The second dose shall be administered not earlier than twenty-eight (28) days and not later than eight (8) weeks after the first dose.
- MMR doses administered before the age of seven (7) may satisfy § 143.1, unless given before twelve (12) months of age or at an interval of less than twenty-eight (28) days between doses.
- If single antigen measles, mumps, and rubella vaccines were administered, two (2) doses of each vaccine shall be administered not less than twenty-eight (28) days apart. A dose of any one (1) of the single antigen vaccines and a dose of another of the single antigen vaccines shall not be administered less than twenty-eight (28) days apart, unless administered on the same day. A dose of MMR, Varicella, one of the single-antigen measles, mumps, and rubella vaccines, or any other live parenteral vaccine shall not be administered less than twenty-eight (28) days apart, unless administered on the same day.

144 HEPATITIS B

- A student who has not received a primary immunization shall receive a total of three (3) doses. The second dose shall be administered not earlier than four (4) weeks and not later than eight (8) weeks after the first dose. The third dose shall be administered no earlier than eight (8) weeks after the second dose and no earlier than sixteen (16) weeks after the first dose.
- Hepatitis B doses administered before the age of seven (7) may satisfy § 144.1, unless administered at less than the required age or minimum interval between each dose.

- As an alternative to the requirements of §§ 144.1 and 144.2, an unvaccinated student between eleven (11) and fifteen (15) years of age may receive a two (2) 1mL-dose schedule of ten (10) micrograms per milliliter (mcg/mL) of Recombivax HB given between four (4) and six (6) months apart. This alternative shall apply only for students vaccinated between eleven (11) and fifteen (15) years of age. The first dose shall be administered between eleven (11) and fifteen (15) years of age, and the second dose shall be administered before age sixteen (16). The student's parent or legal guardian shall provide written certification of proper administration of the two (2)-dose schedule to the student's school. The certification shall include correct formulation for both doses administered according to the correct schedule.
- 145 VARICELLA (Chickenpox)
- A student under thirteen (13) years of age who has not received primary immunization shall receive one (1) dose of varicella vaccine. Beginning with the 2008/2009 school year, a student under thirteen (13) years of age shall receive a second dose of varicella administered at three (3) months and by four (4) months after the previous dose. If the second dose was given twenty-eight (28) days or more after the first dose, then the second dose does not need to be repeated. Varicella shall not be administered within twenty-eight (28) days of receiving a dose of MMR, one of the single-antigen measles, mumps, or rubella vaccines, or any other live parenteral vaccine, unless administered on the same day.
- A student thirteen (13) years of age or older who has not previously received a varicella vaccine shall receive two (2) doses administered not less than twenty-eight (28) days and not more than two (2) months apart. Varicella shall not be administered within twenty-eight (28) days of receiving a dose of MMR or one of the single-antigen measles, mumps, or rubella vaccines, unless administered on the same day.
- Beginning with the 2008/2009 school year, a student thirteen (13) years of age or older who has previously received one (1) dose of varicella vaccination shall receive a second dose not less than twenty-eight (28) days and not more than two (2) months after the previous dose. Varicella shall not be administered within twenty-eight (28) days of receiving a dose of MMR or one of the single-antigen measles, mumps, or rubella vaccines, unless administered on the same day.
- Varicella doses administered before the age of seven (7) may satisfy the requirements of §§ 145.1, 145.2, or 145.3, unless given before twelve (12) months of age or at an interval of less than twenty-eight (28) days between doses.
- 145.5 The varicella vaccination shall not be required for a student who has

written certification of infection with varicella that includes either:

- (a) Copy of laboratory report as evidence of varicella disease or immunity to varicella; or
- (b) A health care provider's diagnosis or verified history of varicella or herpes zoster disease that includes the month and year of the disease.

IV. A new section 146 is added to read as follows:

- 146 HUMAN PAPILLOMAVIRUS (HPV)
- Beginning with the 2009/2010 school year, a female student enrolling in grade six (6) for the first time shall receive the first dose of HPV vaccine at age eleven (11) and by age twelve (12).
- The second dose of HPV vaccine shall be administered not less than four (4) weeks after the first dose and by two (2) months after the first dose.
- 146.3 A third dose of HPV vaccine shall be administered not less than twelve (12) weeks after the second dose and by six (6) months after the first dose.
- The parent or legal guardian of a student required to receive a vaccine under this section may opt out of the vaccination for any reason by signing a form provided by the Department that states that the parent or legal guardian has been informed of the HPV vaccination requirement and has elected not to participate.

V. Sections 147 through 154 are amended to read as follows:

- 147 MENINGOCOCCAL
- Beginning with the 2009/2010 school year, one dose of quadrivalent meningococcal vaccine shall be administered at eleven (11) years of age and by twelve (12) years of age.
- Previous doses of quadrivalent meningococcal vaccine may satisfy § 147.1 unless given before the appropriate age.
- 148 REQUIRED IMMUNIZATIONS FOR STUDENTS EIGHTEEN (18)
 YEARS OF AGE AND OLDER
- The required immunizations for each student eighteen (18) years of age and older, and prior to entry into a school or post high school program shall be as set forth in sections 148 through 152. Doses of immunizations shall be spaced according to these regulations or the recommendations of

the federal Advisory Committee on Immunization Practices (ACIP) published after the effective date of these regulations.

- 149 TETANUS, DIPHTHERIA (Td), ACELLULAR PERTUSSIS (Tdap)
- A student who has not received primary immunization shall receive three
 (3) doses of diphtheria-tetanus-containing vaccine. Beginning with the
 2008/2009 school year, Tdap shall be used for one of the three (3)
 diphtheria-tetanus-containing vaccines in the series, preferably, the first
 dose. The first and second doses shall be administered not less than four
 (4) weeks apart. The third dose shall be administered not less than six (6)
 months after the second dose.
- DTP, DT, DTaP, Td or Tdap doses administered before the age of eighteen (18) may satisfy § 148.1, unless administered before the appropriate age or at less than the required minimum interval between doses. If the last dose of diphtheria-tetanus-containing vaccine was given before four (4) years of age, an additional dose of Td/Tdap shall be administered not less than six (6) months after the previous dose. Beginning with the 2008/2009 school year, Tdap shall be used for one (1) dose.
- 149.3 A Td/Tdap diphtheria-tetanus-containing booster dose shall be administered at ten (10) years after the primary series or the last booster and by eleven (11) years of age. Beginning with the 2008/2009 school year, Tdap shall be used for one dose.
- 150 MEASLES, MUMPS, RUBELLA (MMR)
- A student born in 1957 or later who has not received primary immunization shall receive two (2) doses of MMR. The second dose shall be administered not sooner than twenty-eight (28) days and not later than two (2) months after the first dose.
- MMR administered before the age of eighteen (18) may satisfy § 150.1, unless given before twelve (12) months of age or at less than twenty-eight (28) days between each dose.
- 150.3 If single antigen measles, mumps, and rubella vaccines are used, two (2) doses of each vaccine shall be administered not less than twenty-eight (28) days apart. A dose of any one (1) of the single antigen vaccines and a dose of another of the single antigen vaccines shall not be administered less than twenty-eight (28) days apart, unless administered on the same day. MMR shall not be administered within twenty-eight (28) days after a dose of varicella or one of the single-antigen measles, mumps, or rubella vaccines, unless administered on the same day.

151 HEPATITIS B

- A student who has not received a primary immunization shall receive a total of three (3) doses of hepatitis B vaccine. The second dose shall be administered not earlier than four (4) weeks after the first dose and not later than eight (8) weeks after the first dose. The third dose shall be administered not earlier than eight (8) weeks and not later than sixteen (16) weeks after the second dose and not earlier than sixteen (16) weeks after the first dose.
- Prior doses of Hepatitis B, including administration of a two (2) dose schedule of Recombivax HB pursuant to § 144.3, may satisfy §151.1, unless administered at less than the required minimum interval between doses.
- 152 VARICELLA (Chickenpox)
- A student thirteen (13) years of age or older who has not previously received a varicella vaccine shall receive two (2) doses administered not less than twenty-eight (28) days and not more than two (2) months apart. Varicella shall not be administered within twenty-eight (28) days of receiving a dose of MMR or one of the single-antigen measles, mumps, or rubella vaccines, unless administered on the same day.
- Beginning with the 2008/2009 school year, a student eighteen (18) years of age or older who has previously received one (1) dose of varicella vaccination shall receive a second dose not earlier than twenty-eight (28) days and not later than two (2) months after the previous dose. Varicella shall not be administered within twenty-eight (28) days of receiving a dose of MMR or one of the single-antigen measles, mumps, or rubella vaccines, unless administered on the same day.
- Varicella doses administered before the age of eighteen (18) may satisfy the requirements of §§ 152.1 or 152.2, unless given before twelve (12) months of age or at an interval of less than twenty-eight (28) days between doses.
- The varicella vaccination shall not be required for a student who has written certification of infection with varicella that includes either:
 - (a) A copy of a laboratory report as evidence of varicella disease or immunity to varicella; or
 - (b) A health care provider's diagnosis or verified history of varicella or herpes zoster disease that includes the month and year of the disease.

- 153 MENINGOCOCCAL
- Except as provided in § 153.3, beginning with the 2008/2009 school year, each first-year student enrolled in a school of post-secondary education in the District of Columbia and living, or who may live, in on-campus student housing shall receive one (1) dose of meningococcal vaccine.
- 153.2 A school of post-secondary education in the District of Columbia shall:
 - (a) Notify a student eighteen (18) years of age or older or the parent or legal guardian of a student less than eighteen (18) years old, in writing, of the requirement for meningococcal vaccination. Notice shall be given at the time the school accepts a student for admission or when a student registers for classes, if students are not required to apply for admission before registering for courses.
 - (b) Include written notice of the requirement for meningococcal vaccination in:
 - (1) Admission acceptance information;
 - (2) Student health-related information and materials;
 - (3) Resident life information and materials;
 - (4) The student handbook; and
 - (5) The college catalog.
 - (c) Provide information about the risks of contracting meningococcal disease and about the availability and effectiveness of meningococcal vaccine to:
 - (1) A student eighteen (18) years of age or older who resides in, or may reside in, on-campus student housing; or
 - (2) The parent or legal guardian of a student less than eighteen (18) years of age who resides in, or may reside in, oncampus housing.
 - (d) Keep on file in the student's records any waiver form a student submits, or parent or guardian submits on behalf of a student, requesting waiver of the requirements of § 153.1.
- A student eighteen (18) years of age or older, or the parent or legal guardian of a student less than eighteen (18) years of age, may obtain a waiver from the requirements in § 153.1 if the individual submits a form

with information stated in § 153.4 to the school of post-secondary education.

- A form requesting waiver of the requirements of § 153.1 shall include the following information:
 - (a) A statement that the applicant is:
 - (1) Eighteen (18) years of age or older and applying on his or her own behalf; or
 - (2) The parent or legal guardian of a student who is less than eighteen (18) years of age;
 - (b) A statement that the applicant has received and reviewed the information provided by the school of post-secondary education on the risk of contracting meningococcal disease and the availability and effectiveness of meningococcal vaccine;
 - (c) A statement that the applicant refuses meningococcal vaccine on his or her own behalf, if the applicant is eighteen years of age or older, or on behalf of a student who is less than eighteen (18) years of age;
 - (d) Spaces on the form for the following:
 - (1) The applicant's printed name;
 - (2) The printed name of the student, if the student is different from the applicant
 - (3) The applicant's Signature; and
 - (c) The date of execution of the form.
- 154 ALTERNATIVE EVIDENCE OF IMMUNITY
- Laboratory evidence of immunity for each vaccine-preventable disease may be accepted in lieu of the required immunizations for each disease described in sections 130 through 153 and may be required in particular circumstances.
- V. A new section 199 is added to read as follows:
- 199 DEFINITIONS

Advisory Committee on Immunization Practices (ACIP)—the advisory body that

makes recommendations on the use of vaccines in the United States including ageappropriate immunizations and the proper interval between vaccinations.

Combination vaccine—a vaccine that merges into a single product the antigens that prevent different diseases or that protect against multiple strains of infections agents causing the same disease.

Day—a calendar day, unless otherwise indicated.

Department—the District of Columbia Department of Health.

Diphtheria tetanus acellular pertussis (DTaP)—an inactivated vaccine that provides protection from contracting diphtheria, tetanus, and pertussis, containing acellular pertussis in a single dose that is intended for use only in children under seven (7) years of age.

Diphtheria tetanus whole-cell pertussis (DTP)—an inactivated vaccine that provides protection from contracting diphtheria, tetanus, and pertussis, containing whole-cell pertussis in a single dose and was intended for use only in children under seven (7) years of age. This vaccine is no longer routinely administered in the United States.

Health Care Provider—a person licensed in the District of Columbia to give health care including a Registered Nurse, Medical Doctor, Nurse Practitioner, or Physician Assistant.

Hib—an inactivated vaccine to immunize against hemophilus influenza type B.

Human papilloma virus (HPV)—an inactivated vaccine that provides protection from contracting certain forms of the human papilloma virus.

Inactivated polio vaccine (IPV)—an inactivated vaccine that provides protection from contracting polio that is administered by syringe.

Live oral polio vaccine (OPV)—an attenuated, live-virus vaccine containing that is administered orally and provides protection from contracting polio, but may also cause polio in rare cases. This vaccine is no longer routinely administered in the United States.

Measles mumps rubella (MMR)—an attenuated, live-virus vaccine containing a combination of measles, mumps, and rubella viruses.

Meningococcal vaccine—an inactivated serigroup-specific quadrivalent meningococcal vaccine against serigroups A, C, Y, and W-135.

Month—a period of thirty (30) consecutive days.

On-campus student housing—housing provided to students, regardless of the fee, that is owned, rented, or contracted for and operated by a school of post-secondary education, or through written agreement, with an agent of the school of post-secondary education.

PCV-7—an inactivated heptavalent pneumococcal conjugate vaccine composed of purified polysaccharides of seven (7) serotypes (C4, 6B, 9V, 14, 18C, 19F, and 23 F).

Primary immunization—the initial series of immunizations a child receives at ageappropriate intervals excluding booster doses.

School year—the period established by the District of Columbia Schools, Public Charter Schools, or a private or parochial school as the beginning and end dates of a regular school program, typically spanning parts of two calendar years.

Student—a child enrolled in a public, private, parochial, or charter school in the District of Columbia or a child enrolled in a child development center in the District of Columbia.

Tetanus diphtheria-containing (Td-containing)—an inactivated vaccine that contains at least tetanus and diphtheria toxoids and provides protection from contracting diphtheria and tetanus in a single dose that is intended for children over seven (7) years of age.

Tetanus diphtheria acellular pertussis (Tdap)—a vaccine that provides protection from contracting tetanus, diphtheria, and pertussis, containing acellular pertussis in a single dose that is intended for children over seven (7) years of age.

Undervaccinated—the circumstance of having received an incomplete immunization series.

Unvaccinated – the circumstance of having received no immunizations in an antigen series.

Persons desiring to comment on these proposed rules should submit comments in writing to the Department of Health, Office of the General Counsel, 825 North Capitol Street, N.E., 4th Floor, Washington, D.C. 20002, no later than thirty (30) days after the date of publication of this notice in the D.C. Register. Copies of these proposed rules and related information may be obtained between 8:30 A.M. and 5:00 P.M. Monday through Friday, excluding holidays, at the address stated above.

PUBLIC SERVICE COMMISSION OF THE DISTRICT OF COLUMBIA 1333 H STREET, N.W., SUITE 200, WEST TOWER WASHINGTON, D.C. 20005

NOTICE OF PROPOSED RULEMAKING

TELEPHONE TARIFF 08-3, IN THE MATTER OF THE APPLICATION OF VERIZON WASHINGTON, DC INC. FOR AUTHORITY TO AMEND THE GENERAL SERVICES TARIFF, P.S.C.-D.C.-NO. 203

- 1. The Public Service Commission of the District of Columbia ("Commission") hereby gives notice, pursuant to D.C. Official Code Section 2-505, of its intent to act upon the Application of Verizon Washington, DC Inc. ("Verizon DC") in the above-captioned matter in not less than 30 days from the date of publication of this Notice of Proposed Rulemaking ("NOPR") in the D.C. Register.
- 2. On February 22, 2008, Verizon DC filed an application requesting authority to amend the following tariff pages:

GENERAL SERVICES TARIFF, P.S.C.-D.C.-NO. 203 Section 31, Original Page 6.1 Original Page 8.1

- 3. Through this tariff filing, Verizon DC seeks to introduce an additional discount option, the Voice Discount Plan, for Regional Essential and Regional Value bundled services.² The Voice Discount Plan is available to residential customers subscribing to either Regional Essential or Regional Value bundled services. Verizon DC asserts that the proposed revisions are filed pursuant to Price Cap Plan 2004, although they are not classified under the Plan.³
- 4. The complete text of the tariff pages is on file with the Commission. Copies of the proposed tariff may be reviewed at the Office of the Commission Secretary, 1333 H Street, N.W., 2nd Floor, West Tower, Washington, D.C. 20005, between the hours of 9:00 a.m. and 5:30 p.m., Monday through Friday. Copies of the tariff pages are available upon request, at a per-page reproduction cost and may also be obtained on the Commission's website at www.dcpsc.org.
- 5. Comments on the proposed tariff revisions must be made in writing to Dorothy Wideman, Commission Secretary, at the above address. All comments must be

D.C. Official Code, § 2-505 (2001 Ed.).

See Application at 1.

See id. See also Formal Case No. 1005, In the Matter of Verizon Washington, D.C. Inc.'s Price Cap Plan 2004 for the Provision of Local Telecommunications Services in the District of Columbia, Order No. 13370, rel. September 9, 2004. ("Price Cap Plan 2004" or "Plan").

received within 30 days of the date of publication of this NOPR in the *D.C. Register*. Persons wishing to file reply comments may do so no later than 45 days of the date of publication of the NOPR in the *D.C. Register*. Once the comment period has expired, the Commission will take final rulemaking action on Verizon DC's Application.